

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ET		2-24-00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		66300	11-33
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	1.30.01	
2	✓	2.22.01	
3	✓	3.28.02	
4	✓	4.17.02	
5	✓	5.17.03	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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